

**MOTION FOR DEFAULT FOR  
FAILURE TO APPEAR, JUDGMENT  
AND ORDER FOR WEEKLY PAYMENTS**

JD-CV-49 Rev. 8-99  
P.B. §§ 17-23, et seq.

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
www.jud.state.ct.us

COURT USE ONLY

AA



**TO: The Superior Court**

**INSTRUCTIONS TO PLAINTIFF/PLAINTIFF'S ATTORNEY**  
Complete this Motion and an Affidavit of Debt (JD-CV-52) and send original of each to the Clerk's Office and one copy of each to all defendants. Complete section I of the Notice of Judgment and Order for Weekly Payments (JD-CV-50) and file in duplicate with the Clerk's Office.

RETURN DATE

DOCKET NO.

<input type="checkbox"/> Judicial District	<input type="checkbox"/> Housing Session	<input type="checkbox"/> G.A. No. _____
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ADDRESS OF COURT (No., street, town and zip code)

NAME OF CASE (*Plaintiff v. Defendant*)

NAME(S) OF ALL DEFENDANT(S) AGAINST WHOM MOTION IS FILED

**MOTION FOR DEFAULT FOR FAILURE TO APPEAR, JUDGMENT AND ORDER FOR WEEKLY PAYMENTS**

In the above entitled action, the Plaintiff(s) respectfully represent(s) that the Defendant(s) named above has (have) failed to file an appearance within two days after the return date. The Plaintiff(s) therefore request(s) that a default be entered against the Defendant(s) for failure to appear and that the Court enter judgment after default in favor of the Plaintiff(s) in accordance with the Affidavit of Debt attached. ("X" one of the following)

The Plaintiff(s) also request(s) that an order for  NOMINAL  REASONABLE \$ \_\_\_\_\_ weekly payments be entered.

NAME OF PERSON SIGNING MOTION	ADDRESS
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SIGNED <b>X</b>	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> ATTORNEY FOR PLAINTIFF(S)	DATE SIGNED
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**MILITARY SERVICE AFFIDAVIT**

The undersigned, being duly sworn, deposes and says that : ("X" one of the following)

- the undersigned is unable to determine whether or not the Defendant(s) in this action are in the military or naval service of the United States.
- no Defendant in this action is in the military or naval service of the United States, and that, to the personal knowledge of the undersigned (state facts showing defendant is not in such service):

SIGNED (Affiant)	PRINT NAME AND, IF APPLICABLE, TITLE, OF AFFIANT	DATE SIGNED
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Subscribed and sworn to before me:	SIGNED (Comm. of Sup. Court/Notary)	DATE SIGNED
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<b>PLAINTIFF'S BILL OF COSTS</b>		<b>CERTIFICATION OF SERVICE</b>
Complaint Fee.....	\$ _____	This is to certify that copies of the above Motion, Military Service Affidavit, Affidavit of Debt, and Plaintiff's Bill of Costs were delivered/mailed via U.S. Mail, postage prepaid on (date): _____
Entry Fee.....	\$ _____	to the following Defendants: (Enter name(s) and address(es) of Defendant(s)). _____ _____
Sheriff's Fee.....	\$ _____	_____
Proceedings Before Trial.....	\$ _____	_____
.....	\$ _____	_____
<b>TOTAL.....</b>	<b>\$ _____</b>	_____

SIGNED <b>X</b>	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> ATTORNEY FOR PLAINTIFF(S)	<b>FOR COURT USE ONLY</b>
DATE SIGNED		